

TREE AFFIDAVIT / PERMIT APPLICATION

	(Office Use Only)				
	INSPECTOR INITIALS DATE PASS / FAIL COMMENTS APPROVED NOT APPROVED INITIALS DATE				
Project Addres	ss/Location:			Outside City Lim	its?
Project Name/	Subdivision:			Unit:	Plat #:
		/website/zoning/viewer.asp):	Lot No.	Block:	NCB/CB:
Class of Work	(Check as Appropriate):	☐ Site Work ☐ Platting	☐ New Structure/P	arking	(≥ 2500 ft ²)
Project Type (C	Check as Appropriate):	Commercial # acres	Res	sidential # lots	
Company ID#:		Contact ID#:	Pub	lic Funds Used:	□ Y □ N
Contact Person:		_	Company Name:		
Email:			Phone #		
Owner:			Phone #	Fax #	#
Address:		City		State Zip	
	has protected trees, but e a direct violation of the p	this work will in no way cause dama rovisions of Article V, § 35-477 (b)(2	ige to or the destruction 2). (AERIAL PHOTO O	R TREE SURVEY REQ	(UIRED) OR
	•	Tree Preservation Ordinance – VES nt, Heritage or Historic trees that wil			OR EPLAN & TREE
	ode sections and appendi	ces regarding Tree Preservation and	ertify that I am aware of I agree to adhere to the	Article V, § 35-523 and requirements including	§ 35-C110 of the U.D.C. an any additional fees
State of Texa	as)				
County of Be) xar)		Signatu	re	
Before me, the person whose	ne undersigned authority on the name is signed to the foregother.	his day personally appeared joing affidavit and sworn by me, states u	nder oath that all of the fac	tts therein set forth are tru	known to me to be the ue and correct.
Sworn To Be	fore me, this	day of	, 20		
		·		Notary Public In And Fo	or The State of Texas